09/20/2021 03:03 PM Total:\$40.00 Prepared By PATRICIA MCGLOTHLIN Pgs=3 Name: Patricia A. MCG-10+hlin State: Ne vad 9 Zip Code: 89460 KAREN ELLISON, RECORDER E05 After Recording Return To Name: Rick + Patricia McGlothlin Address: 1045 Country Land State: Nevada Zip Code: 89460 Space Above This Line for Recorder's Use **NEVADA QUIT CLAIM DEED** STATE OF NEVADA COUNTY OF Douglas KNOW ALL MEN BY THESE PRESENTS, That for and in consideration of the sum of married) in hand paid to <u>Patricia McGlothlin, a grantor</u>, residing at 1045 Country Lang County of Dovalas, City of Gardner Ville, State of Nevada (hereinafter known as the "Grantor(s)") hereby conveys and quitclaims to Rick + Patricia MG/oth/ina arantee , residing at 1045 Country Lanc County of Davalas, City of Gardnerville, State of Nevada (hereinafter knówn as the "Grantees(s)") all the rights, title, interest, and claim in or to wit: Resident home and propert

To have and to hold, the same together with all and singular the appurtenances thereunto belonging or in anywise appertaining, and all the estate, right, title, interest, lien, equity and claim whatsoever for the said first party, either in law or equity, to the

only proper use, benefit and behoof of the said second party forever.

DOUGLAS COUNTY, NV

Rec:\$40.00

2021-974281

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| Patricia A. McGlothlin Patricia A. McGlothlin | |
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| Grantor's Signature | Grantor's Signature |
| Patricia A. McGlothin | |
| Grantor's Name | Grantor's Name |
| Address | Address |
| City, State & Zip | City, State & Zip |
| STATE OF NEVADA) | |
| COUNTY OF DOUBLAS | |
| I, the undersigned, a Notary Public in and for sthat \(\frac{fArricia}{Arricia} \) \(\frac{A}{A} \) \(\frac{MCG/vHLiN}{MCG/vHLiN} \) who instrument, and who is known to me, acknowled informed of the contents of the instrument, they day the same bears date. Given under my hand this \(\frac{Zo}{day} \) day of \(\frac{Soptimes}{day} \) | edged before me on this day that, being |
| | Public NOTARY PUBLIC STATE OF NEVADA County of Douglas My Appointment Expires August 5, 2024 MY Appointment Expires August 5, 2024 |
| | |

| DECLARATION OF VALUE 1. Assessor Parcel Number(s) 2. Type of Property: 2. Type of Property: 3. Vacant Land by Single Fam. Res. c) Condo/Twnhse dy 2.4 Plex c) Apt. Bidg f) Comm' Vind'1 g) Agricultural h) Mobile Home i) Other 3. Total Value/Sales Price of Property: Deed in Lieu of Foreclosure Only (value of property) Transfer Tax Value: Real Property Transfer Tax Due: 4. If Exemption Claimed: 2. Transfer Tax Exemption per NRS 375.090, Section # 5 5. Partial Interest: Percentage being transferred: 4. If Exemption Claimed: 3. Total Value/Sales Price of Property: The undersigned declares and acknowledges, under penalty of perjury, pursuant to NRS 375.060 and NRS 375.110, that the information provided is correct to the best of their information and belief, and can be supported by documentation if called upon to substantiate the information provided herein. Furthermore, the parties agree that disallowance of any claimed exemption, or other determination of additional tax due, may result in a penalty of 10% of the tax due plus interest at 1% per month. Pursuant to NRS 375.030, the Bayer and Seller shall be jointly and severally liable for any additional amount owed. Signature Address: Apply Country Lane Country | | E OF NEVADA | |
|---|----------|--|--|
| a) /220-20-001-008 b) | | | A |
| 2. Type of Property: a) Vacant Land b) Single Fam. Res. c) Condo/Twnhse d) 2-4 Plex e) Apt. Bldg f) Comm'l/Ind'l gol Agricultural h) Mobile Home i) Other 3. Total Value/Sales Price of Property: Deed in Lieu of Forcelosure Only (value of property) Transfer Tax Value: Real Property Transfer Tax Due: 4. If Exemption Claimed: a. Transfer Tax Exemption per NRS 375.090, Section # 5 b. Explain Reason for Exemption: Adding husband to hitle. 5. Partial Interest: Percentage being transferred: w The undersigned declares and acknowledges, under penalty of perjury, pursuant to NRS 375.060 and NRS 375.110, that the information provided is correct to the best of their information and belief, and can be supported by documentation if called upon to substantiate the information provided herein. Furthermore, the parties agree that disallowance of any claimed exemption, or other determination of additional tax due, may result in a penalty of 10% of the tax due plus interest at 1% per month. Pursuant to NRS 375.030, the Buyer and Seller shall be jointly and severally liable for any additional amount owed. Signature Addivess: Signature Capacity SELLER (GRANTOR) INFORMATION (REQUIRED) Print Name: Addivess: Address: JA45 Country Lane. City: Garaperyulle State: Leye Add 2 Typ: \$94400 COMPANYPERSON REQUESTING RECORDING (required if not the seller or buyer) Print Name: Escrow # Address: Escrow # | 1. | Assessor Parcel Number(s) $(2.2.5 \pm 0.2.5) \pm 0.00$ | /\ |
| 2. Type of Property: a) Vacant Land b) Single Fam. Res. c) Condo/Twnhse d) 2-4 Plex PAGE Apt. Bldg f) Comm'I/Ind'l BOOK PAGE PAGE BOOK PAGE BOOK PAGE BOOK PAGE | | b) | |
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| Condo/Twnhse d) 2-4 Plex e) Apt. Bidg f) Commi 'l/Ind'! Agricultural h) Mobile Home i) Agricultural h) Mobile Home Other DATE OF RECORDING: 3. Total Value/Sales Price of Property: Deed in Lieu of Foreclosure Only (value of property) Transfer Tax Value: Real Property Transfer Tax Due: 4. If Exemption Claimed: a. Transfer Tax Exemption per NRS 375.090, Section # 5 b. Explain Reason for Exemption: Adding hushand to title. 5. Partial Interest: Percentage being transferred: % The undersigned declares and acknowledges, under penalty of perjury, pursuant to NRS 375.060 and NRS 375.110, that the information provided is correct to the best of their information and belief, and can be supported by documentation if called upon to substantiate the information provided herein. Furthermore, the parties agree that disallowance of any claimed exemption, or other determination of additional tax due, may result in a penalty of 10% of the tax due plus interest at 1% per month. Pursuant to NRS 375.030, the Buyer and Seller shall be jointly and severally liable for any additional amount owed. Signature | 2. | | \ \ |
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| Signature Atricia A. MANGALLIX Capacity GLANTEE) INFORMATION SELLER (GRANTOR) INFORMATION (REQUIRED) Print Name: Address: Address: Same City: Gardnerville State: Mevada Zip: 89460 Capacity Print Name: Capacity BUYER (GRANTEE) INFORMATION (REQUIRED) Print Name: City: Same City: State: Zip: COMPANY/PERSON REQUESTING RECORDING (required if not the seller or buyer) Print Name: Escrow # Address: | 103 | un in a penalty of 1070 of the tax due plus interes | it at 170 per month. |
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| SELLER (GRANTOR) INFORMATION (REQUIRED) Print Name: Patricia A. McG/oth/in Address: 1945 Country Lane City: Gardnery: 1894/20 State: Meyada Zip: 894/20 Company/person required if not the seller or buyer) Print Name: Escrow # Address: | A GLOGIA | | |
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| SELLER (GRANTOR) INFORMATION (REQUIRED) Print Name: Patricia A. McG/oth/in Address: 1945 Country Lane City: Gardnerville State: Nevada Zip: 89460 COMPANY/PERSON REQUESTING RECORDING (required if not the seller or buyer) Print Name: Escrow # Address: | Signati | ure | Canacity |
| Print Name: Patricia A. McG/oth/in Print Name: Address: 1945 (Duntry Lane Address: Same City: Gardnery) State: Nevada Zip: 89460 State: Zip: COMPANY/PERSON REQUESTING RECORDING (required if not the seller or buyer) Print Name: Escrow # Address: | | | |
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| COMPANY/PERSON REQUESTING RECORDING (required if not the seller or buyer) Print Name: Address: | | | Address: O a MAD |
| COMPANY/PERSON REQUESTING RECORDING (required if not the seller or buyer) Print Name: Address: | 76 | Gardner wille. | City: Sall |
| COMPANY/PERSON REQUESTING RECORDING (required if not the seller or buyer) Print Name: Address: | 76. | David a 7in: 694/11) | State: 7in: |
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| (AS A PUBLIC RECORD THIS FORM MAY BE RECORDED/MICROFILMED) | Jity . | | |